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CONFIRMATION NO. 8357

Bib Data Sheet

SERIAL NUMBER 09/988,355	FILING DATE 11/19/2001 RULE	CLASS 713	GROUP ART UNIT 2134	ATTORNEY DOCKET NO. P 284126 2011374US/A/kp
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APPLICANTS

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** CONTINUING DATA ***** *CSB*

** FOREIGN APPLICATIONS ***** *CSB*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 12/04/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FINLAND	SHEETS DRAWING 2	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>CSB</i>	Verified and Acknowledged	Examiner's Signature	Initials	

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 909
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TITLE
 Personal firewall with location detection

FILING FEE RECEIVED 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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